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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-876 | | | | | | | | | Application or Docket Number 9/696 49/ | | |
|--|--|---|--|--|----------------------|-------------|--------------------|----------------------------|--|----------------------------|-----------------------------|
| APPLICATION AS FILED (Calumn 1) | | | | | PART I (Column 2) | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
| | FOR | NUMB | NUMBER FILED | | MUMBER EXTRA | | RATE (\$) | FEE (\$) | | RATE (\$) | FEE (\$) |
| | IC FEE FR 1.18(a), (b), or (| (cj) | | | | lΓ | | | · | | |
| | RCH FEE FR 1.1600, 0), or (r | ni) | | | | ÌΓ | | | | | |
| EXA | MINATION FEE FR 1.18(0), (p), or (| | | | | 1 | | | 1 | | |
| TOT | AL CLAIMS FR 1.16(I)) | | minus 20 | | | l I, | | | OR | X s | |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | | IMS | minus 3 • • | | | 1 | | | • | x = | |
| APP FEE | LICATION SIZE | sheets of is \$250 () additional | cification : paper, the 125 for sel 150 sheet | filication and drawings exceed 100 laper, the application size fee due 125 for small entity) for each 50 sheets or fraction thereof. See 41(a)(1)(G) and 37 CFR 1.18(s). | | | | | | | |
| MUL | TIPLE DEPEND | ENT CLAIM PRES | ENT (37 C | FR 1.16(j)) | JL | | | | | | |
| * if the difference in column 1 is less than zero, enter "O" in column 2. | | | | | | | TOTAL | |] | TOTAL | |
| APPLICATION AS AMENDED - PART II (2/05/05 (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
| πA | 4 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (8) | | RATE (\$) | ADDI- TIONAL FEE (\$) |
| AMENDMENT | Total gar off (1.180) | 26 | Minus | "26 | • / | 1 [| x = | | OR | х = | |
| S | Independent (37 CFR 1.16(t)) | ٠ . | Minus | <u> </u> | -/ | П | X = | | OR | х = | |
| ME | Application Size Fee (37 CFR 1.16(s)) | | | | |] [| | | 1 | | • |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II)) | | | | | | ŀL | | | OR | | |
| | 1 / | | | • | | | TOTAL ADO'L FEE | | OR | TOTAL ADD'L FEE | |
| © 2/27/C6 (Column 1) (Column 2) (Column 5) | | | | | | | | | | | |
| NTB | tare | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (8) | | RATE (\$) | ADOI- TIONAL FEE (\$) |
| ME | Total (37 CFR 1.18(1) | 12 | Minus | - 26 | • / | | x = | | OR | х = | |
| AMENDMENT | Endependent (37 CFR 1.1004)) | . 2 | Minus | " (3 | ۳/ |] [| X = | | OR | х = | |
| 3 | Application Size Fee (57 CFR 1.16(a)) | | | | |] [| | |] | | |
| <u> </u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II)) | | | | | JL | | | OR | | |
| | | | | | | | TOTAL ADO'L FEE | | OR | TOTAL ADO'L FEE | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". | | | | | | | | | | | |

"If the Trighest Number Previously Paid For In This SPACE is less than 3, error at the Trighest Number Previously Paid For In This SPACE is less than 3, error at the Trighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.